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TRANSMITTAL FORM

Application Number	10/681621
Filing Date	10/7/2003
First Named Inventor	Julius O. Smith III
Art Unit	2167
Examiner Name	LU, KUEN S
LUMEN Docket Number	JOS-101/DIV

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OFFICE OF PETITIONS

ENCLOSURES (*Check all that apply*)

☐ Small Entity Claimed	☐ Reply to Missing Parts/ Incomplete Application	☐ Certified Copy of Priority Doc(s)
☒ Fee Attached	☐ Reply to Missing Parts under 37 CFR 1.52 or 1.53	☐ Terminal Disclaimer
☐ Reply / Amendment *No. of Pages* ____	☐ Declaration *No. of Pages* ____	☐ Request for Refund
☐ After Final	☐ Recordation Cover Sheet & Assignment *No. of Pages* ____	☐ After Allowance Comm. to TC
☐ Affidavit(s)/Declaration(s)	☐ Power of Attorney, Revocation Change of Corresp. Address	☐ Appeal Comm. to TC (*Appeal Notice, Brief, Reply Brief*)
☐ Information Disclosure Statement	☐ Statement(s) under 3.73(b)	☐ Appeal Comm. to Board of Appeals and Interferences
☐ Copies of Cited References	☐ Copy of Assignment(s)	☐ Petition to Revive
☐ Drawings *No. of Sheets* ____	☐ Power(s) of Attorney	☐ Certificate of Correction

☒ Other: **Request under Rule 28(c) to excuse error in small entity status, and payment of deficiency for Yr4 Maintenance Fee.**

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

FIRM NAME	**LUMEN PATENT FIRM**		
SIGNATURE	**/ Thomas J. McFarlane / Reg.No. 39,299**		
PRINTED NAME	**Thomas J. McFarlane**		
DATE	**10/29/10**	REGISTRATION NUMBER	**39,299**

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being fascimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below:

SIGNATURE	**/ Robert Lodenkamper / Reg.No. 55,399**
PRINTED NAME	**Robert Lodenkamper**
DATE	**10/29/10**